

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>	Attorney Docket No.	<b>IS01229AP</b>
	Application Number	10/747,790
	Filing Date	<b>DECEMBER 29, 2003</b>
	First Named Inventor	WALTON FEHR
	Group Art Unit	2836
	Examiner	KAPLAN, HAL IRA

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> <b>Amendment</b>  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Status Letter  <input type="checkbox"/> One Month Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Supplemental Information Disclosure Statement, PTO-1449  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers  <input checked="" type="checkbox"/> <b>Drawings: Replacement Sheet</b>  <input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> To Convert a Provisional Application  <input type="checkbox"/> Declaration  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Notice of Appeal <i>(Appeal Notice, Brief, Reply Brief)</i>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Postcard  <input type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-1713</u> . A duplicate copy of this sheet is enclosed.		
<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. <u>50-1713</u> . A duplicate copy of this sheet is enclosed.		

### CALCULATION OF FEE

					Small Entity		Large Entity		
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus			x \$25=	0		x \$50=	
Indep.		Minus			x \$100=	0		x \$200=	
First Presentation of Multiple Dep. Claim					+\$180=	---		+\$360=	
					total add'l fee	\$ 0		total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 Cardinal Law Group 1603 Orrington Ave, Suite 2000 Evanston, IL 60201		
Signature	/FRANK C. NICHOLAS/	Date:	<u>SEPTEMBER 1, 2006</u>
CERTIFICATE OF ELECTRONIC SUBMISSION			
I hereby certify that this correspondence is being submitted electronically to the U.S. Patent and Trademark Office on this date: <span style="float: right;"><u>SEPTEMBER 1, 2006</u></span>			
Signature	/FRANK C. NICHOLAS/ FRANK C. NICHOLAS (33,983)		Date: <u>SEPTEMBER 1, 2006</u>